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				Application Number	UNKNOWN	
INFO	DRMATIO	N DIS	CLOSURE	Filing Date	HEREWITH	
STA	TEMENT	BY A	PPLICANT	First Named Inventor	RAINER SCHMELZ	
_				Art Unit	UNKNOWN	
(use as many sheets as necessary)				Examiner Name	UNKNOWN	
Sheet	1	of	1	Attorney Docket Number	3080	

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Examiner Cite		Document Number 2 Number Kind Code (if known)	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear		
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Examiner Initials*	Cite		Foreign Patent Do	cument	Publication Date	Name of Patentee or	Pages, Columns, Lines, Where Relevant	
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